



HARRISON COUNTY SHERIFF'S DEPARTMENT

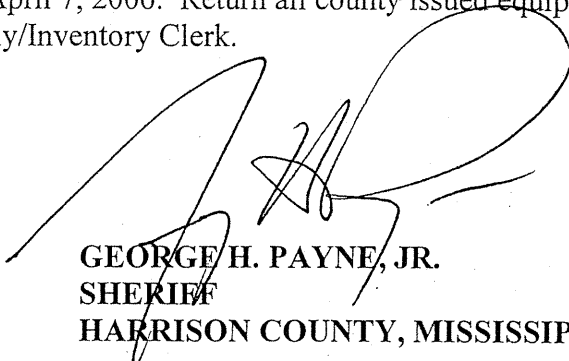
George H. Payne, Jr.
Sheriff

Post Office Box 1480
Gulfport, Mississippi 39502

Personnel Order: 2006-0080

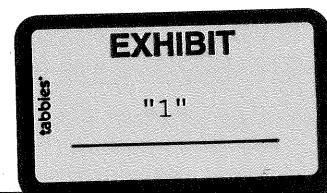
Subject: TERMINATION
Date: APRIL 11, 2006
To: REGINA RHODES

I have been advised of and approved your termination from the Harrison County Sheriff's Department, effective April 7, 2006. Return all county issued equipment and gear to Sherry Cruthirds, Supply/Inventory Clerk.


GEORGE H. PAYNE, JR.
SHERIFF
HARRISON COUNTY, MISSISSIPPI

GHP/plp
cc

Personnel File
Major Wayne H. Payne
Captain Steve Campbell
Major Dianne Riley
Captain Rick Gaston
Captain Rupert Lacy
Captain Walter Pitts
Lt. Joe Pevey
Kendra Necaise, Payroll/Time
Captain Windy Swetman
Shirley Ross, Civil Service Commission
Regina Leslie, Records
Sherry Cruthirds, Inventory/ Property Administrator
Dina Bates, Harrison County Personnel
Rhonda Faul, Payroll
Angela Blake, Chancery Clerk's Office



LEMMAS01

SHERIFF DEPT - PERSONNEL PROGRAM

LEWMAS01/HC

BADGE NO: 192 5 SSN: 612029314 DOB: 4 - 2 - 1977 RACE: W SEX: F
NAME: RHODES, REGINA LYNN BLEOST#: D01897
PHYSICAL ADDRESS: 2107 RUSTWOOD DRIVE DL NUM: _____
CITY: BILOXI ZIP: 39532 - _____ HOME NO: 3889050
MAILING ADDRESS: SAME AS ABOVE
CITY: _____ ZIP: _____ - _____ PAGER NO: _____
DATE HIRED: 5 - 17 - 2004 DATE TERMINATED: 04 - 07 - 2006 EMPLOYMENT TYPE: F
DIVISION: JA RANK: OFFICER HIGHEST SCHOOL YEAR COMPLETED: 12 VET(Y/N): N

NEXT OF KIN:

NAME: RHODES, ROGER K RELATIONSHIP: FATHER
ADDRESS: 2107 RUSTWOOD DR
CITY: BILOXI , MS ZIP: 39532 - _____ HOME NO.: 3889050
EMPLOYER: VA BILOXI 5235721
REMARKS: _____

ENTER THE APPROPRIATE DATA

Termination

Last Name <i>Rhodes</i>		First Name <i>Regina</i>		Middle Initial		
Address Number		Street		City	State Zip Code	
Social Security Number <i>612 102 19314</i>		Home Phone		Work Phone	Date of Birth	
Driver's License Number		Type	Expiration Date		<input type="checkbox"/> Valid <input type="checkbox"/> Revoked	<input type="checkbox"/> Restricted <input type="checkbox"/> Suspended

VOLUNTARY SURVEY

Check One: <input type="checkbox"/> Female <input type="checkbox"/> Male	Check One of the following: (Marital Status) <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married Spouse Employed
U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	Check One of the following: (Ethnic Origin) <input type="checkbox"/> White <input type="checkbox"/> Hispanic <input type="checkbox"/> American Indian/Alaskan Native <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Asian/Pacific Islander
EEO Job Category	EEO Job Function
Impairment Type (If any)	
Foreign Languages? _____	<input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write <input type="checkbox"/> Speak <input type="checkbox"/> Read <input type="checkbox"/> Write
Sign Language? <input type="checkbox"/> Yes <input type="checkbox"/> Certified	

Military Service Branch:	<input type="checkbox"/> Prior Service <input type="checkbox"/> Disabled Veteran	<input type="checkbox"/> Active Reserves <input type="checkbox"/> Inactive Reserves
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Department Name <i>Sheriff's Dept</i>	Account Number <i>001</i>	Fund <i>-211</i>	Dept <i>-432</i>	Obj.	Active Employee? <input type="checkbox"/> Yes <input type="checkbox"/> No
Job Title <i>Officer</i>	Worker's Comp Code		Last Raise Date		
Employee Pay Status <i>Full Time</i>	Pay Type <input type="checkbox"/> H <input type="checkbox"/> S	Current Pay Rate \$	Proposed Pay Rate \$		

Emergency Notification	Relationship	Telephone Number
Address Number Street		City State Zip Code

Comments:

Employee

George Payne Sheriff
 Department Head

HCFDD